California Health Interview Survey

Making California's Voices Heard on Health



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What's New and Notable in CHIS 2017

This document describes new and notable design features and data collected in the California Health Interview Survey (CHIS) 2017. CHIS data users should review the information below and our detailed online documentation before analyzing or reporting CHIS data. Please visit the following page for more documentation on CHIS methods: chis.ucla.edu/chis/design/Pages/methodology.aspx

New and Updated Survey Questions

Survey questions are added, removed, and modified in each two-year cycle of CHIS to meet stakeholders' needs and monitor emerging public health concerns. Questions are removed from the interview to reduce its length and save data collection costs when topics are no longer relevant for public health surveillance, or when they are not funded by a sponsor. Most CHIS questions remain in the interview across CHIS cycles.

For CHIS 2017, approximately 80 percent of the content continued from CHIS 2016. Occasionally, changes to question wording were made based on methodological evaluations or when user feedback strongly suggested that changes would produce better data. Otherwise, questions were kept consistent across years to aid in trending. Reinstated questions were asked in cycles prior to 2015-2016, and again in 2017-2018.

For a full list of topics in CHIS 2017, please visit chis.ucla.edu/chis/design/Pages/survey-topics.aspx.

Noteworthy Additions to CHIS 2017

NEW ADULT QUESTIONS

- Marijuana use¹, frequency and methods of use³
- Female pregnancy intentions¹
- Male birth control use¹
- Voting eligibility and engagement¹
- Current WIC enrollment², WIC participation in the past 5 years¹, and satisfaction with WIC³
- Prescription drug misuse² and heroin use²
- Pre-Exposure Prophylaxis³
- Reinstated questions:
 - ♦ Smoking cessation¹
 - ♦ Current birth control use and pregnancy status¹
 - Race most identified with¹
 - ♦ Paying off mortgage and loan¹ (used in creation of the Elder Index™)
 - Medical debt¹
 - Usage of health savings accounts¹

NEW TEEN QUESTIONS

- Sleep and technology use¹
- Marijuana use², frequency of use², and methods of use³
- Birth control use and counseling²

NEW CHILD QUESTIONS

- Reinstated questions:
 - Prescription medication and therapy needs¹
 - ♦ Developmental concerns¹
 - ♦ Usage of public dental health programs¹
- ¹ Available in all CHIS data products including Public Use Files (PUFs)
- ² Available through AskCHIS (ask.chis.ucla.edu)
- ³ Confidential data is only available through the Data Access Center (DAC). For more information please visit chis.ucla.edu/chis/data/Pages/confidential.aspx



(Continued)

The full CHIS 2017 questionnaire is available at chis.ucla.edu/chis/design/Pages/ questionnairesEnglish.aspx.

Improved Sample Coverage

In an effort to improve cell phone coverage of California residents, CHIS 2017 included a sample of likely residents (based on ZIP code) with out-of-state cell phone numbers to better capture recent imports to the state. CHIS 2017 also oversampled residents under 65 to increase the ability to reach households with children and teens.

Oversamples

CHIS 2017 continued to oversample Korean and Vietnamese Americans as has been done in previous cycles since CHIS 2001. For the first-time ever, CHIS was able to expand the listed sample of Korean and Vietnamese surnames to include cell phone numbers. CHIS 2017 also saw oversamples in two Southern California counties. San Diego Health and Human Services provided funds to oversample San Diego County while the Imperial County Health Department also provided funds to oversample residents of northern Imperial County.

New Vendor

As the result of a competitive bidding process, SSRS conducted the CHIS 2017-2018 data collection under

contract with the UCLA Center for Health Policy Research.

Data Collection Timeline

Like past CHIS data collection, CHIS 2017 data were collected as part of a two-year cycle (2017-2018). CHIS 2017 data were collected between June 2017 and December 2017. Approximately 50 percent of adult interviews were conducted from landline phone numbers and 50 percent from cell phone numbers.

From CHIS 2011 forward, single-year data are available representing a yearly cross-section of California's population. Relative to the larger, two-year CHIS data files available prior to 2011, small populations (such as child, teen, or some racial/ethnic groups) or rare conditions and characteristics will have fewer observations in the single-year data file. In such cases, pooling two or more single-year data sets may be required to achieve sufficient sample size and statistical stability.

Users who need more information about pooling or trending data over time should review the *Analyze CHIS Data* website at chis.ucla.edu/chis/analyze/ Pages/default.aspx or go to the *CHIS FAQ* page at chis.ucla.edu/chis/faq/Pages/default.aspx. You can also email questions to dacchpr@ucla.edu.

Learn more about CHIS at: chis.ucla.edu

CHIS is conducted by the UCLA Center for Health Policy Research





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